



INTEGRATING PSYCHEDELICS

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Abstract

This Research introduces the concept that transformative experiences in various forms need to be integrated into our lives, especially Psychedelic Experiences. We introduce the concept of integration, what psilocybin therapy is, and how the two have come together in previous research. This research paper gauges post-psychedelic issues that may be experienced by participants who engaged in a psychedelic experiment with psilocybin (magic mushrooms) and if integration (the supportive frame of process to help one incorporate the transformative experience in their lives to help them) benefits those who take psychedelics. The study employed a qualitative phenomenological approach, using semi-structured interviews to gain an understanding of participants' (n = 120) split into a 2 x 2 between subject's design – experienced with psychedelics receiving integration, experience with psychedelics receiving no integration, non-experienced first timers receiving integration, and first timers experiencing no integration. We determined their after-effects by gauging their well-being. There were more post psychedelic issues expedited in the non- integration group. These issues included: mood fluctuations, 'post-ecstatic blues', disconnection from community, re-experiencing symptoms, spiritual bypass, and perceived lack of support. Integration challenges occurred immediately after the psilocybin experience (once the main psychedelic effects had worn off) and in the days and weeks following the experiment and resolved with time. The experiences related in this article align with existing research that describes the 'spiritual emergency' phenomenon; the potential challenges that can arise after ecstatic experiences and how these challenges may be integral to the transformative potential of such experiences. We discuss the implications for psychedelic integration and how it can correlate to other areas of Psychology and focus on ethical harm reduction practices to improve future psychedelic research.

Integrating Psychedelics

People can experience a great deal of traumatic, life-changing, and transformative experiences but do not know how to navigate life after such a shake in their lives. Whether you have had a traumatic event that drastically changed your life or a life-shaking psychedelic experience, how can people bring about balance after such a transformation. Psychedelic Experiences are very transformative and can sometimes be traumatic themselves. A lot of people are very uneducated when it comes to how to have a proper psychedelic experience, and even less educated on the integration aspect after such mind-shifting experiences. Psychedelic Therapy utilizes specific entheogens and plant medicines such as LSD, Mushrooms, MDMA, and other plant medicines used in ceremonies, such as Ayahuasca and DMT, in a therapeutic setting to offer people an alternative way of medicine to traditional therapy. In this study, we will focus specifically on the basics of psychedelic therapy with low doses psilocybin (aka magic mushrooms). Within this therapy, there is a great deal of educating a client on the substances, what to expect, how to prepare, and what to do after the experience. Outside the therapeutic or spiritual setting, whether it's micro-dosing or full dosing, people tend to not be very uneducated beforehand on these substances, their potential, and how to prepare themselves. Post Psychedelic issues can lead to future psychological consequences and spiritual disconnection without proper integration of them. 50-69% of people do not integrate traumatic experiences and around 70% of people do not integrate psychedelic experiences leaving one to wonder if utilizing integration would make a huge impact in our lives in many areas. Integration of Psychedelics is the process of taking great insight from these transformative experiences and reanalyzing it, sitting with it, and implementing its teachings to better understand and take away from them to fully benefit their life. It is the practice of mindfulness, which is just watching the way you react, the way you

feel and the way you think and incorporating new concepts into those things from the new profound experiences. It is becoming aware of all the new emotions that exist inside you and incorporating them in different ways into the world and emotions you have always been used to. Integration is the most important key element to Psychedelic Therapy that most people overlook.

Even people who have dealt with traumatic experiences do not take the time to reflect and heal from those transformative situations. This relates to current PTSD treatments that are lacking. One study indicated that Vietnam Veterans who had experienced a great deal of trauma did not have a set period of therapy to process that trauma after being diagnosed with PTSD. They were diagnosed but did not receive therapy to integrate those traumatic experiences so they can function like human beings in society, so they expedited more symptoms and issues from the trauma. The trauma they experienced over time without integration would affect their way of life and affect them psychologically. Integration here means taking time to analyze the traumatic experience and incorporate their old life with the new life of trauma together into who they are now. Although it is uncomfortable to relive those traumatic experiences in therapy, not integrating it psychologically would lead veterans to start displaying outward negative actions and reactions. The researchers studied 37 men, 13 PTSD subjects, and 11 in the combat control group. They used a psychological and military interview, the Minnesota Multiphasic Personality Inventory (MMPI), and Rorschach tests to test whether research integrating would help their quality of life. The subjects that had not integrated their experience after the trauma revealed that those experiences continued to uncontrollably show up in their responses and in their lives such as nightmares, PTSD, etc. (Van Der Kolk & Ducey 1989) This study relates to Psychedelics & Integration because people may experience PTSD symptoms from not integrating life shaking psychedelics experiences as well, especially if they utilize them for mental health disorders

including PTSD which (percentage of people) do. Overall, we get a general understanding here of how integration helps process things in your cognitive and begin to have a basic understanding of how integration can help in more than one aspect.

The novel approach to advancing PTSD therapy, and other therapies, and adding better integration techniques is to take a deeper look into an alternative therapy such as Psilocybin (Mushroom) Therapy. Harris and Robin advances research on Psilocybin and its effects on the brain. They studied how psilocybin affects the brain in 15 experienced participants and used physiological measurements to see the difference in consciousness into the psychedelic stages of consciousness: MRI. Etc. Their studies show how 6 months after their participants experienced psilocybin, they reported an increase in subjective well-being, openness, and depression scores were significantly decreased. They admit further work is required to build and test on the hypothesis of the use of psilocybin on the brain, depression, etc. (2012) This research starts to build on our focus on the use of psychedelics (psilocybin) in therapy, and after a long period of time the participants still reap the benefits.

Cavanna and Muller's experiment had non-progressive findings in the double-blind placebo micro dose study. Their findings were "non-progressive" because they lacked some factors in the research and it did not correlate to positive results for therapy with the psilocybin, and they even state this in limitations. The participants were healthy people considering Psychedelic Therapy already. The experiment had participants in two different groups, the placebo control group, and the micro dose experiment group and did not find any change in the participants and their cognitive. The researchers admitted the study was not set up in a structured manner to reflect the positive effects of micro dosing because they only had participants micro dose twice per week, when other advanced studies utilize micro dosing over a longer period.

With their structure, they concluded that they could not assess the effects of micro dosing over a long period of time (2022). With the inconsistent micro dosing schedule, this study did not show any significant effects from the psilocybin, making this a weak study. Finding an experiment that goes against the grain of my hypothesis will help me better understand how to build on the mistakes of other researchers and show full proof evidence that micro dosing or using psychedelic therapy the right way can make a huge difference in research. I can argue what they missed in the study to make it a better experiment because they lack different factors.

The Psychedelic Integration Scales study uses two scales of measurement to study the impact of integration on Psychedelic Therapy opposed to people who do not have an integration period after psychedelic use. The Researchers created the integration Scales (IES) to capture “positive behavioral engagement” with integration after psychedelic use and the Experienced Integration Scale (EIS) to screen the internal aspects of feeling integrated. They turned the qualitative data into quantitative data to represent positive findings in the study. The results show us that these scales of measurements are real and reliable for portraying behavior and experimental ways of Psychedelic Integration. Researchers stated that it is important that the science world understand how to maximize the potential and longevity of these psychedelic experiences and their aftereffects for future studies and lower the chance of harm from lack of education and a supportive frame while partaking in such substances (Frymann and Whitney 2022). This study is a key factor in whether it makes a difference in the positive theories about integration improving Psychedelic Therapy. Expresses concern for the lack of education for micro dosing and Psychedelics for therapeutic and medical uses. People lack the education for these substances as well as know little to nothing about integration and the processes psychedelics or mushrooms entail. Education in the subject is the first important thing as well as

understanding different variables that can manipulate the experience such as set, setting, holistic measures and how the processes are integrated. Integrating would be the “supportive frame” i.e., including all these different facets to build an infrastructure that will support the person through their psychedelic experience.

Compared to other research so far, Lutkajtis and Evans (2023) researched potential harm and issues related to Psychedelic Therapy, which a lot of researchers have yet to do, in an experiment with truffles (a type of psychedelic mushroom) on 30 individuals (different ages and genders) in the Netherlands. Their study presented all ideas of research on psychedelics in years past and created a list of potential treatments they are effective in including psychological and physical issues. The researchers made it plain to be aware of potential side psychological effects of psychedelics without integration or preparation. Researchers considered their religious statuses and their intentions for the experience and recorded results in a qualitative study structured interview. It was identified that 9 out of 30 of the participants experienced integration related issues after the experience and later stated they were able to resolve these issues on their own through meditation, talking to experienced teachers, etc. (2023) This study did not directly show how to measure integration issues or side effects that come along with psychedelic experience but did reflect that there is in fact post psychedelic issues that came up without utilizing integration. Some post psychedelic issues included: mood swings, psychosis, comfortability, , spiritual bypass, ego consumption, and much more. This study closely correlates to my hypothesis in that it takes in a bit more key factors than previous studies about psychedelics and integration such as intention, spiritual stature, the issues that arise in some individuals after the profound experience and more. Also being the most recent study of the ever growing research of Psychedelic Therapy, it pulls a part much more of what the true positive effects of mushrooms

are and bringing to light the issues that can arise from not integrating these profoundly transformative experiences on someone's psyche. To maximize Psychedelic benefits, we must zone in to how to eliminate the after-effect integration issues.

Many people have done Psychedelics and continued with their normal lives for days, weeks and months afterward and felt the need to return and do them from not learning any of the lessons from previous sessions. They do not achieve that well-being they are seeking, and post psychedelic issues can make the healing process even worse. Future participants could take so much in from each experience, but because people lack the proper education, tools, and post integration we do not maximize the benefits or true potential of these healing plants. Research needs to figure out a way to eliminate post Psychedelic issues that could be lessened through the integration period and take a broader look into what those issues are and build on the research about Psychedelic Therapy which is growing before us. Psychedelic Therapy continues to expand, but what can researchers do to expand on what has already established and make it better by managing and resolving Integration issues. The purpose of this study is to determine what would be the best ideal setting, pre-education, and after care integration that would benefit someone beginning Psychedelic Therapy. The study I am presenting researches to see if there is supporting evidence that implementing integration measures will eliminate post-psychedelic issues and increase overall well-being.

Methods

Participants

Participants were 120 volunteers (60 male, 60 females) some of whom have partaken in Psychedelics before (n=60) and some who were completely new to the experience (n=60). For this study I filtered out people who had specific diagnosis (depression, anxiety, BPD, PTSD) to save those specifics for a replicated study. Religious Affiliation was not considered. Participants

ranged between 25 and 50 years of age. Participants were from the United States in hopes there would be no cultural influence. Broad reasons for attending were to “heal mental alignments or physical condition,” “explore/heighten consciousness,” “personal development/insight,” “increase creativity,” and “have a mystical experience never experienced before.”

The 60 experienced volunteers would be split into a group that receives integration (n=30) and a group that does not (n=30). This is the same for the new experiencers who also are split into integration/no integration groups.

Every participant was screened before the experiment to ensure there were no pre-existing health conditions or mental instability that would cause further concern.

Materials

A questionnaire will be issued before the experiment to determine their intention and reason behind the use of psychedelics, to ensure there are no previous psychological or physical alignments, and to gauge how their well-being is before the psychedelic experience.

A questionnaire will be issued after the experiment to determine post psychedelic issues, quality of life (well-being after the experience), mental capacity, and persistence to take another experience. For the experienced participants who receive integration, questioning and gauging how their last experiences related to this experience will help better understand the benefits of the integration.

1 – 10 Scale Survey will be administered after the experience to gauge how the experience helped, how they feel, and if there were any negative experiences/feelings associated with the trip.

Post Psychedelic Issues the hypothesis is measuring mood swings, psychosis, comfortability, psychedelic flashbacks, post-ecstatic blues from such an ecstatic high so participants may feel weird, ungrounded or out of place following the experience, feeling disconnected from others in fear no one understands, spiritual by pass or ego consummation and lack of support. Some of these issues may cause the others like a domino effect, the experimenter needs to isolate and determine the issue.

We will determine observational behavior of participants during the in-person questionnaire to gauge how they have changed from the first questionnaire to the post questionnaire. The conversation was a 1-hour interview talking about their experience, why they volunteered for the experiment, and talk about what they experienced after the experiment including any issues that may have occurred.

Psychedelic Therapy was described and explained to the participants. Integration therapy was only explained to the group who received it.

Preparation sessions were prepared for the groups who were to partake in the preparation and integration part for the experiment. A week before they were given research information about what psilocybin is, how it can help you, and the benefits. They would continue researching for the week as well as be advised of specific food, activities, and to stay away from before the experience. The day of the experience they will continue to prepare with meditation, cleansing, breath work, and one on one session with the Integration Specialist. The day after the psilocybin session, and for several weeks afterwards, participants took part in a structured integration program which addressed somatic and social integration. This is studied over a 3-month period. The group that would receive no preparation or integration will only be educated on what Psychedelic Therapy is with no beginning preparation or post integration. Their aftereffects will be studied over a 3-month period.

All participants were given a journal to record their experiences and thoughts for weeks after the experience.

Procedure

Each group of n=30 received a 2-gram mediator dose of psilocybin mushrooms. Participants supplied their informed consent before taking the dried mushrooms, Dried Psilocybin Mushrooms (2 grams) will be given in an outside cabin instead of a clinical setting, and facilitators were there on standby to monitor for safety concerns, but essentially let the experience take its course. All participants were in the same setting with the same dose. Facilitators will record any negative behaviors that may arise from the participants and if the trip goes “bad” will separate the participant from the group to have them describe what they are feeling in that moment and help them if needed intervention is required. Once the experience is

over, the participants will be fed and go to sleep. The next morning, they will have the opportunity to talk about their experience in the questionnaire formed interview and take a scale survey of their experience. The participants in the integration study will begin their integration immediately following up to the 3 months. The other non-integration participant group will be checked on once a month until the 3 months are up with no post integration or counseling.

Participants were debriefed and dismissed after the 3 months and given resources for more integration after the experiment if they needed. Particularly the non- integration group will need the resources if they exhibited post-psychedelic issues.

Recording Results

Our Hypothesis wanted to determine if it mattered that Psychedelic users receive integration or not to determine how they can better reap the benefits from Psychedelic use to increase their well-being. Our hypothesis would look for if participants reported less or more “depression, anxiety, pain, disconnection, spiritual connection etc.” experienced less post psychedelic issues, or if they had a persistence to do psychedelics again soon after (determining whether the first experience helped them or not). Essentially the research is testing to see if there is an increase of overall well-being from psychedelics and use of integration afterwards.

Discussion

After the experiment our research presented post-psychedelic challenges that were experienced by multiple individuals after the 2-gram mushroom experience. Post-Psychedelic challenges occurred in the hours immediately following the psychedelic experience (i.e. after the main psychoactive effects of the psilocybin had worn off) and in the days and weeks following the retreat. From this experiment, research suggests that the immediate post-experience and post-retreat period may be a critical time when additional support, care and monitoring is vital (i.e. integration therapy to diminish or lessen the post psychedelic issues). There also seemed to be various positive after-effects including long-term remission of significant health conditions

Anticipated Results

The results of the present study support the hypothesis that utilizing integration after psychedelic therapy improves overall well being and diminishes post-psychedelic issues. This 2 x 2 between subjects' design gives us accurate qualitative data that supports our hypothesis. The experiment found that there was a main effect of integration, and the participants in the integration groups would have an overall higher well-being than those who did not receive integration after psychedelic use. There is an interaction between the integration group and the non-integration group. The non-experienced group (first timers) had an overall higher scale of wellbeing from integration after psychedelic use than the experienced group. This tells me that introducing integration to more people newly interested in psychedelic therapy can improve their well-being tremendously the first time then having to continuously do psychedelic therapy and learn about integration later. The experienced group of participants still benefitted, but not as much considering their prior experiences, they already had an initial higher level of well-being. There is no main effect of prior experience because that group still benefitted whether they received integration or not.

Limitations

Although my hypothesis was right there were a few limitations in the study that I will consider for future studies. The first is an issue in the non-experienced group of participants in which some of the participants in the groups who did not receive preparation or integration experienced a bad trip. This led the facilitators to have to intervene in the experience, which could cause some error variance or even a confound to the study since they were only there to observe and not intervene. This also interferes with the ethics of the study because non-experienced participants did not know what to expect when they are having this first-time experience, and not everyone will always react positively to such a transformative mind-altering experience. In future studies, it is a possibility that people who have only had previous experiences can participate in these studies, but it was good to have a basis of understanding of what can benefit newcomers to the psychedelic world. Another limitation is that the study was subjected to only Americans with no particular religion, in future studies other cultures should be considered as well as other spiritual beliefs, which make also effect the experiences with psychedelics and post psychedelic issues. In future studies we should expand the participants with these other factors in mind.

Applications

In terms of future research, this experiment can be manipulated and changed to contribute to other diagnoses such as PTSD, Depression, Bi-polar, Anxiety etc. There are many areas of Psychology that Psychedelic Therapy and Integration both by themselves can help increase peoples well beings. Even if we are not looking at the psychedelic aspect of the study, integration itself can help an array of people facing traumatic situations, dramatic life changes, and physical health shifts because all these experiences require us to take a step in and try to balance two different worlds unknown to each other and meet in the middle. We all could use a support frame to ground new things whether good or bad into our lives. Despite the limitations, the present study has enhanced our understanding of Psychedelics and Integration. We hope that the current research will continue to expand and stimulate future research to improve our wellbeing, change our outlook on traditional therapy, and fit psychedelic therapy and integration into a world of ever-growing holistic therapy approaches.

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